

Benefit Recipient Reimbursement Claim Form

For fees resulting from the delay of November 2013 direct deposits

If you incurred fees or charges as a result of the delay in the direct deposit of your November 2013 Massachusetts Teachers' Retirement (MTRS) benefit payment, the MTRS will reimburse you.

Again we are very sorry for the inconvenience and understandable frustration this has caused you.

INSTRUCTIONS: To submit your claim for reimbursement:

- 1) **Complete** Parts 1 through 3 below.
- 2) **Make a photocopy of your completed form**, and be sure to keep the originals of your attachments for your records.
- 3) **Send** your completed and signed original Claim Form, along with PHOTOCOPIES of the required documents, to:

Massachusetts Teachers' Retirement System
ATTN: Finance Department
One Charles Park, 2nd floor
Cambridge, MA 02142-1206

Please note that we may require more information to review and process your claim. If so, we may contact you to obtain additional supporting materials. Please allow up to 30 days for the MTRS to process your reimbursement.

PART 1

CLAIMANT INFO

Name. First M. Last Last 4 digits of SSN

Address. Number and street

City State ZIP

E-mail

Daytime phone number .

PART 2

CLAIM DETAILS AND REQUIRED DOCUMENTATION

Please list and briefly describe the fees or charges that you incurred as a result of the delay in the direct deposit of your November 2013 MTRS benefit payment. Feel free to provide additional information on a separate page.

**TOTAL AMOUNT OF
YOUR CLAIM**

\$

Reminder:
DO NOT SEND
YOUR ORIGINAL
DOCUMENTS.

Send PHOTOCOPIES—
and keep the originals
for your records.

You must also submit the following required documents:

- ☐ PHOTOCOPY or screenshot of your bank account statement showing the date and amount(s) of the fee charged. This must show the name of the institution, account number, and your name and address.
- ☐ PHOTOCOPIES of any other materials or evidence to support your claim, including overdraft notices, insufficient funds notices, and returned check fees.

PART 3

CLAIMANT CERTIFICATION AND SIGNATURE

I certify under the penalties of perjury that:

- this claim contains only fees and charges incurred as a direct result of a processing error by the Massachusetts Teachers' Retirement System for a direct deposit payment directed to me and originally due on November 29, 2013; and, has not been previously paid, waived, reimbursed or otherwise negated by another institution including my bank, credit card company, insurance policy or other institution; and,
- the information provided with this claim is true and accurate.

I agree to accept this amount in full satisfaction and final settlement of this incident.

Claimant's signature Date